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## BIB DATA SHEET

CONFIRMATION NO. 8357

<b>SERIAL NUMBER</b> 10/701,547	<b>FILING or 371(c) DATE</b> 11/05/2003 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 31132.163	
<b>APPLICANTS</b> Hai H. Trieu, Cordova, TN; Michael C. Sherman, Memphis, TN; Bret M. Berry, Jacksonville, FL; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/04/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /BRUCE EDWARD SNOW/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> TN	<b>SHEETS DRAWINGS</b> 5	<b>TOTAL CLAIMS</b> 45	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> HAYNES AND BOONE, LLP 901 Main Street Suite 3100 Dallas, TX 75202 UNITED STATES					
<b>TITLE</b> COMPRESSIBLE CORPECTOMY DEVICE					
<b>FILING FEE RECEIVED</b> 1564	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		